

CLINICAL NOTES AND CASE REPORTS

AN APPARATUS FOR APPLICATION OF HEAT IN THE TREATMENT OF GONORRHEA IN THE FEMALE

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IN the past few years the prolonged application of heat has become one of the most important features in treating gonorrhea. A number of complicated devices (1, 2, 3) are being used for this purpose.

The accompanying illustrations show a very simple and inexpensive method of applying prolonged heat, with the added advantage of drainage. There are two pieces of apparatus—one for the office, and the other for home use.

In the office treatment the patient is placed on the table in the lithotomy position and on a level with the lavatory (Fig. 1). The irrigator is inserted into the vagina and is held firmly against the vulva by the patient, so that there is very little spill. The cold water is then turned on gently until a very small stream comes from the outlet. The hot water is turned on slowly, gradually increasing the temperature until it is as hot as the patient can stand. The rise in temperature is noted on the thermometer in the flask and is the guide for adjusting the flow so that the temperature can be kept at a fixed point. The patient soon learns to tolerate a temperature of from 118 to 120 degrees Fahrenheit over a period of twenty-five to thirty minutes. By this method heat is applied directly to the cervix and vagina with constant irrigation.

When the patient has become accustomed to the office treatment she is instructed in the use of the simplified apparatus for home treatment, as shown in Figure 2. She is instructed to lie in the bathtub with the thighs against the abdomen and the heels on rail of tub, with the hips elevated. This balloons out the vagina by putting it in a per-

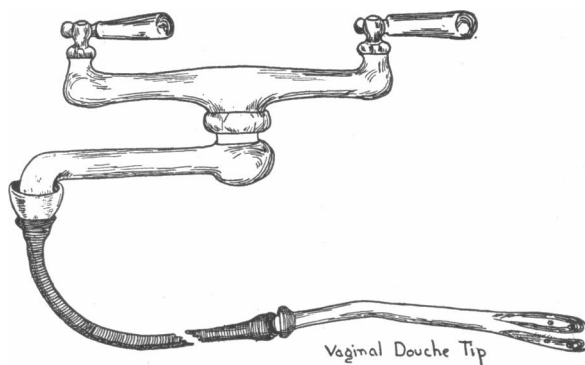


Fig. 2.—Simplified apparatus for home treatment.

pendicular position and allowing air to enter. The tip is inserted into the posterior cul-de-sac. The patient, having experience in the office, is instructed to begin the home treatment with a small stream of cold water, just enough to cause an overflow from the vagina, then to increase the temperature gradually with the hot water, thus having a continuous irrigation without force and applying direct heat to all parts of the vagina. These treatments are taken at home for fifteen minutes twice a day, or as indicated.

Due to the direct connection, with no mixing chamber or thermometer for a guide, the patient is warned of the possible danger of a too sudden rise in temperature and is cautioned to be careful and increase the temperature very gradually.

This type of treatment supersedes (1) the use of tampons which are obnoxious and interfere with drainage, (2) the one or two-quart douches which do not provide enough heat or drainage, and (3) the old Sitz baths, which are weakening and depressing. In comparison, the patients favor the prolonged irrigations with heat.

COMMENT

The ideal treatment of gonorrhea today is based upon:

1. The application of heat, with drainage.
2. Elimination of foci of infection in the cervix and in Skene's and Bartholin's glands by either cauterization with actual cautery or endothermy or removal by surgery.
3. Prevention of reinfection.

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RELAPSING FEVER

REPORT OF CASE

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MEADER¹ in 1915 reported the first cases of true relapsing fever arising from a focus in this country. Two years later Waring² reported a case in a twelve-year-old boy from the same focus at Bear Creek, Colorado. Briggs³ in 1921 reported the first proven cases occurring in California, although there had been an epidemic among the Chinese population of Oroville in 1874. These cases are somewhat doubtful, however,

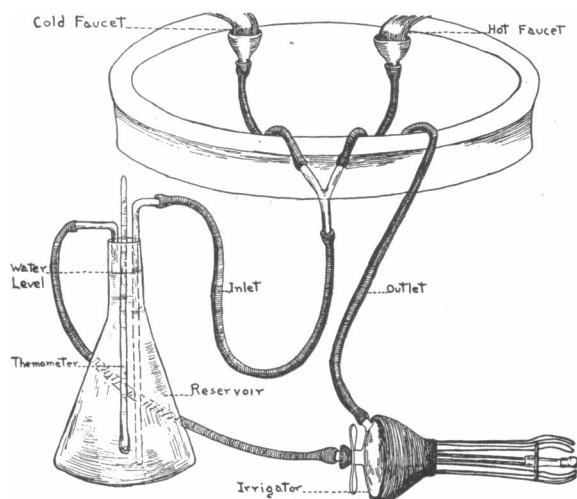


Fig. 1.—Apparatus for office treatment.